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**O I P E
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JUN 21 2004 FORM**
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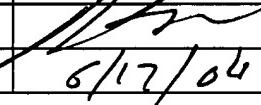
Total Number of Pages in This Submission

Application Number	10/008,924
Filing Date	11/16/2001
First Named Inventor	G. Altman
Art Unit	1651
Examiner Name	D. Naff
Attorney Docket Number	032794-054780

ENCLOSURES (Check all that apply)

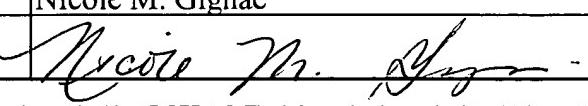
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Statement of Non-Deceptive Intent - D. Horan; Assent of Assignees to Add Inventor - Tissue Regeneration, Inc. and Trustees of Tufts College; Statements Under 37 C.F.R. 3.73(b); Supplemental Oath/Dec; Certificate of Mailing; Return Receipt Postcard.
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	
The Commissioner is authorized to charge fee deficiencies or credit overpayments to the NIXON PEABODY LLP Deposit Account No. 50-0850.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David S. Resnick (Reg. No. 34,235) NIXON PEABODY LLP, 100 Summer Street, Boston, MA 02110-2131
Signature	
Date	6/17/04

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
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Typed or printed name	Nicole M. Gignac
Signature	
	Date 6/17/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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JUN 21 2004

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 130.00)

Complete if Known	
Application Number	10/008,924
Filing Date	11/16/2001
First Named Inventor	G. Altman
Examiner Name	D. Naff
Art Unit	1651
Attorney Docket No.	032794-054780

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:
 Deposit Account Number
 Deposit Account Name

50-0850
NIXON PEABODY LLP

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	X =
Independent Claims	-3*** =	X =
Multiple Dependent		=

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	130.00
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	130.00

(Complete if applicable)

Name (Print/Type)	David S. Resnick	Registration No. (Attorney/Agent)	34,235	Telephone (617) 345-6057
Signature			Date	9/17/04

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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1651/JF

PATENT

Practitioner's Docket No. 032794-054780-RCE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gregory Altman et al.

Application No.: 10/008,924 Group No.: 1651

Filed: November 16, 2001 Examiner: Naff, David M.

For: MATRIX FOR THE PRODUCTION OF TISSUE ENGINEERED LIGAMENTS,
TENDONS AND OTHER TISSUE

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.8(a) and 1.10)

I hereby certify that this correspondence:

1. Transmittal Form (1 pg.);
2. Amendment, Request and Fee to Delete and/or Add to Original Erroneously Named or Not Named Inventor(s) in Nonprovisional Application – Declaration (37 C.F.R. § 1.48(a)) in duplicate (4 pp.);
3. Statement of Non-Deceptive Intent to Accompany Request for Correction of Inventorship Under 37 C.F.R. § 1.48(a) – D. Horan (1 pg.);
4. Supplemental Declaration and Power of Attorney – executed by all inventors (4 pp.);
5. Assent of Assignee to Correction and/or Addition of Inventor(s) – Tissue Regeneration, Inc. (2 pp.);
6. Power of Attorney of Entire Interest (Revocation of Prior Powers) – Tissue Regeneration, Inc. (2 pp.);
7. Statement Under 37 C.F.R. § 3.73(b) Establishing Right of Assignee to Take Action – Tissue Regeneration, Inc. (3 pp.);
8. Change of Correspondence Address in Application – Tissue Regeneration, Inc. (1 pg.);
9. Assent of Assignee to Correction and/or Addition of Inventor(s) – Trustees of Tufts College (2 pp.);
10. Statement Under 37 C.F.R. § 3.73(b) Establishing Right of Assignee to Take Action – Trustees of Tufts College (3 pp.);
11. Power of Attorney of Entire Interest (Revocation of Prior Powers) – Trustees of Tufts College (2 pp.);
12. Change of Correspondence Address in Application – Trustees of Tufts College (1 pg.);
13. Fee Transmittal (1 pg.);
14. Return Receipt Postcard;

is on the date shown below being:

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transmitted by facsimile to the Patent with and Trademark Office.


Signature
Nicole M. Gignac

Date: June 17, 2004

(type or print name of person certifying)



Patentee's Docket No. 032794-054780-RCE

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gregory Altman et al.

Application No.: 10/008,924

Group No.: 1651

Filed: November 16, 2001

Examiner: Naff, David M.

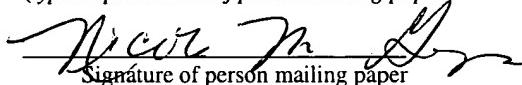
For: MATRIX FOR THE PRODUCTION OF TISSUE ENGINEERED
LIGAMENTS, TENDONS AND OTHER TISSUE

CERTIFICATE OF MAILING (37 C.F.R. SECTION 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

6/17/2004
Date

Nicole M. Gignac
(type or print name of person mailing paper)


Signature of person mailing paper

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT, REQUEST AND FEE TO DELETE AND/OR
ADD TO ORIGINAL ERRONEOUSLY NAMED OR NOT NAMED
INVENTOR(S) IN—NONPROVISIONAL APPLICATION—DECLARATION
(37 C.F.R. § 1.48(a))

1. This amendment and request is to correct the incorrect original naming of inventor(s) in the declaration under 37 C.F.R. § 1.48(a) as set forth and filed on March 15, 2002.
2. Addition of Inventor:

David Horan.
3. Attachments:
 - (a) Statement of Non-Deceptive Intent, David Horan, as required by 37 C.F.R. § 1.48(a);

06/24/2004 HVDONG1 00000012 500850 10008924

01 FC:1460 130.00 DA

In re application of: Gregory Altman et al.
Application No.: 10/008,924
Filed: November 16, 2001

(b) Assent of the Assignee to Correct Inventorship and Statement Under 37 C.F.R. § 3.73(b):

- (i) Tissue Regeneration, Inc.; and
- (ii) Trustees of Tufts College

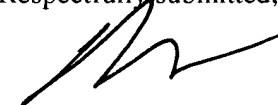
4. Fee Payment (37 C.F.R. § 1.17(i))

The fee required by 37 C.F.R. § 1.17(h) is paid as follows:

The Commissioner is authorized to charge the NIXON PEABODY LLP Deposit Account No. 50-0850 in the amount of \$130.00. Any fee deficiencies or overpayments may be charged/credited to said account. A duplicate copy of this paper is submitted herewith.

Date: 6/17/04

Respectfully submitted,



David S. Resnick (Reg. No. 34,235)
NIXON PEABODY LLP
100 Summer Street
Boston, MA 02110
(617) 345-6057



JUN 21 2004

Attorney's Docket No. 032794-054780

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re of Application of: Altman et al.
Application No.: 10/008,924 Group Art No.: 1651
Filed: November 16, 2001 Examiner: Naff, David M.
Title: MATRIX FOR THE PRODUCTION OF TISSUE ENGINEERED
LIGAMENTS, TENDONS AND OTHER TISSUE

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Date 6/17/2004

Nicole M. Sizemore
(type or print name of person mailing paper)

Nicole M. Sizemore
Signature of person mailing paper

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

STATEMENT OF NON-DECEPTIVE INTENT TO ACCOMPANY
REQUEST FOR CORRECTION OF INVENTORSHIP
UNDER 37 C.F.R. §1.48(A)

I, the person who is being added as an inventor by the Request for Correction of Inventorship being submitted concurrently herewith to correct the inventorship of this patent do hereby declare that the inventorship error in failing to include my name as an inventor on this patent occurred without any deceptive intention on my part.

3-26-04
Date

David J. Horan
David J. Horan, Inventor